

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P99000063101**1. Entity Name  
**SOGNO, INC.****FILED**  
**Feb 19, 2001 8:00 am**  
**Secretary of State**

02-19-2001 90266 020 \*\*\*150.00

0153555

Principal Place of Business  
**200 SOUTH BISCAYNE BOULEVARD**  
**SUITE 4816**  
**MIAMI FL 33139**Mailing Address  
**200 SOUTH BISCAYNE BOULEVARD**  
**SUITE 4816**  
**MIAMI FL 33139**

718430



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**90 ALTON ROAD**  
Suite, Apt. #, etc.  
**APT. 2803**  
City & State  
**MIAMI BEACH FL**  
Zip  
**33139**  
Country3. Mailing Address  
**90 ALTON ROAD**  
Suite, Apt. #, etc.  
**APT. 2803**  
City & State  
**MIAMI BEACH FL**  
Zip  
**33139**  
Country4. FEI Number **65-0945945**  
Applied For  
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

**SALUGGOLA, PIERO**  
**200 SOUTH BISCAYNE BOULEVARD**  
**SUITE 4816**  
**MIAMI FL 33139**

## 7. Name and Address of New Registered Agent

Name  
**FIGARI, VITTORIO**  
Street Address (P.O. Box Number is Not Acceptable)  
**90 ALTON ROAD**  
**APT. 2803**  
City  
**MIAMI BEACH** **FL** Zip Code  
**33139**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **VITTORIO FIGARI**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

**2/12/01**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>D</b>			
	<b>FIGARI, VITTORIO</b>			
	<b>PIAZZA UNITA D'ITALIA 18</b>			
	<b>41035 MARANELLO (MO) ITALY</b>			
	<b>D</b>			
	<b>CHIORBOLI, GIANFRANCO</b>			
	<b>PIAZZA UNITA D'ITALIA 18</b>			
	<b>41035 MARANELLO (MO) ITALY</b>			

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**VITTORIO FIGARI**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/12/01 305.674.7382**

Date

Daytime Phone #

CR2E034 (10/00)